122

U.S. DEPARTMENT OF HOMELAND SECURITY

ELEVATION CERTIFICATE

OMB No. 1660-0008

Federal Emergency Management Agency

Expires February 28, 2009 Important: Read the instructions on pages 1-8. National Flood Insurance Program For Insurance Company Use: SECTION A - PROPERTY INFORMATION Policy Number A1 Building Owner's Name Bulli Farm Investments, LLC A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg, No.) or P.O. Route and Box No. Company NAIC Number 25310 St. Michaels Road City St. Michaels State MD ZIP Code 21663 A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, atc.) Tax Map 32 Grid 11 Parcel 20 A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Non-Residential Horlzontal Datum: 🗵 NAD 1927 🔲 NAD 1983 A5. Latitude/Longitude: Lat. 38d 46m 21a Long. 76d 11m 48s A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1 A9. For a building with an attached garage, provide: A8. For a building with a crawl space or enclosure(s), provide sq ft a) Square footage of crawl space or enclosure(s) 840 sq ft s) Square footage of attached garage b) No. of permanent flood openings in the attached garage b) No. of permanent flood openings in the crawl space or walls within 1.0 foot above adjacent grade __ enclosure(s) walls within 1.0 foot above adjacent grade c) Total net area of flood openings in A9.b sq in 525 so in c) Total nat area of flood openings in A8.5 SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B3. State **B2. County Name** B1. NFIP Community Name & Community Number Maryland **Talbot County** 240066 B9, Base Flood Elevation(s) (Zone **B7. FIRM Panel** B8. Flood 86. FIRM Index B5. Suffix B4, Map/Panel Number AO, use base flood depth) Zone(s) Effective/Revised Date Date 05/15/85 A5 n/a A B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9. Community Determined Other (Describe) FIS Profile **⊠** FIRM Other (Describe) ☑ NGVD 1929 □ NAVD 1988 B11. Indicate elevation datum used for BFE in Item 89: Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐Yes **⊠No** CBR5 ☐ OPA Designation Date SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) M Finished Construction ☐ Bullding Under Construction* Construction Drawings* C1. Building elevations are based on: *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7. Benchmark Utilized _____ Vertical Datum , Conversion/Comments Check the measurement used. ☑ feet ☐ meters (Puerto Rica only) Top of bottom floor (including basement, crawl space, or enclosure floor)_ feet meters (Puerto Rico only) b) Top of the next higher floor meters (Puerto Rico only) feet Bottom of the lowest horizontal structural member (V Zones only) C) meters (Puerto Rico only) ☐ feet Attached garage (top of siab) d) ☐ feet ☐ meters (Puerto Rico only) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) ☑ feet ☐ meters (Puerto Rico cnly) 4.17 Lowest adjacent (finished) grade (LAG) ☑ feet ☐ meters (Puerto Rico cnly) 4.50 Highest adjacent (finished) grade (HAG) SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation STATE LIGHTS D. W. STATE information. I certify that the information on this Certificate represents my best efforts to interpret the data available. i understand that any false statement may be punishable by fine or Imprisonment under 18 U.S. Code, Section 1001. Check here if comments are provided on back of form.

Certifier's Name Thomas D. Lane

License Number 340

Title President

Company Name Lane Engineering, LLC

Address P O Box 1767

City Easton

State MD ZIP Code 21601

Signature

Date 04/06/09

Telephone 410 822 8003



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| IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bidg. No.) or P.O. Route and Box No. | | | Α. | For Insurance Company Use: Policy Number |
| Building Street Address (including Apt., | Unit, Suite, and/or Bidg. No.) | of P.O. Route and Box No. | | |
| City State ZIP Code | | | | Company NAIC Number |
| SECTION | D - SURVEYOR, ENGINE | ER, OR ARCHITECT CE | RTIFICATION (CON | TINUED) |
| Copy both sides of this Elevation Certific | | | | |
| Comments Certificate is for a detache | | | | |
| | | | | |
| Signature | | Date | | |
| SECTION E - BUILDING ELEV | VATION INFORMATION (| SURVEY NOT REQUIRE | D) FOR ZONE AO A | Check here if attachments ND ZONE A (WITHOUT BFE) |
| For Zones AO and A (without BFE), co and C. For Items E1-E4, use natural get. Provide elevation information for grade (HAG) and the lowest adja a) Top of bottom floor (Including b) Top of bottom floor (Including b) Top of bottom floor (Including E2. For Building Diagrams 8-8 with p (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is E4. Top of platform of machinery and E5. Zone AO only: If no flood depth ordinance? Yes No | omplete Items E1-E5. If the C grade, if available. Check the Ithe following and check the alecent grade (LAG). basement, crawl space, or en basement, crawl space, or en bermanent flood openings proof the building is | ertificate is intended to support measurement used. In Puer ppropriate boxes to show who closure) is | art a LOMA or LOMR-F to Rico only, enter mete ether the elevation is ab feet meters a feet meters a feet meters a d/or 9 (see page 8 of in- above or below the B blow the HAG. eet meters above in accordance with the or in in Section G. ENTATIVE) CERTIF Zone A (without a FEM | request, complete Sections A. B. ris. rove or below the highest adjacent bove or below the HAG. bove or below the LAG. structions), the next higher floor HAG. re or below the HAG. community's floodplain management |
| Property Owner's or Owner's Authorize | ad Representative's Name | | | |
| Address | | City | State | ZIP Code |
| Signature | | Date | Telaphor | ê |
| Comments | | | | |
| | | | | Check here if attachments |
| | SECTION G - COM | MUNITY INFORMATION | (OPTIONAL) | |
| The local official who is authorized by lar and G of this Elevation Cartificate. Com | w or ordinance to administer to plete the applicable Item(s) ar | he community's floodplain me nd sign below. Check the ma | nagement ordinance ca esurement used in Item | g Ga, ano Ga. |
| G1. The information in Section C v is authorized by law to certify of | vas taken from other documer elevation information. (Indica: | ntation that has been signed : to the source and date of the | and sealed by a license elevation data in the Co | d surveyor, engineer, or architect who imments area below.) |
| G2. A community official complete | d Section E for a building loca | ited in Zone A (without a FEN | A-issued or community | |
| G3. The following information (Item | ns G4G9.) is provided for co | | | |
| G4. Permil Number | G5. Date Permit Issued | G6. D | ata Certificate Of Comp | iance/Occupancy Issued |
| G7. This permit has been Issued for: | New Construction | Substantial Improvemen | t | |
| G8. Elevation of as-built lowest floor (inc | duding basement) of the build | ng: feet [|] meters (PR) Datum _ | |
| G9. BFE or (in Zone AO) depth of flooding | ng at the building site: | |] meters (PR) Datum | |
| Local Official's Name | | Title | | |
| Community Name | | Telephone | | |
| Signature | | Date | | |
| Comments | | | | |
| | | | | |
| PFMA Farm 91 31 Fahruan, 2008 | | | | Check here if attachments Replaces all previous editions |
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